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AN ESSAY ON INTESTINAL AUSCULTATION.

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Read before the New Haven County Meeting of the Connecticut Medical Society, April 8, 1847, and communicated for the Boston Medical and Surgical Journal.

THE object of the following essay is to draw attention to an application of the art of auscultation hitherto neglected—the auscultation of the sounds produced in the intestinal canal. The cavity of the stomach and intestines, both in health and disease, contains, together with solid and liquid matters, a considerable quantity of aeriform substances. This is shown by examination after death, when air is invariably found in the intestinal canal, and may also be rendered evident, at any time during life, by percussion. These aeriform substances consist of common air, hydrogen and its different compounds, carbonic acid, and various other gases, in variable quantities and proportions in different subjects and in different conditions of the body.

The peristaltic action, which is constant in health and is commonly continued in disease, necessarily produces motions of the solid, liquid and gaseous contents of the intestines; and from the known laws of acoustics it might be philosophically inferred that these motions would be productive of sound. These sounds are sometimes audible at a distance from the body, and are noticed, under the term *borborygmi*, as a symptom in various diseases. As the quantity and proportions of the liquid and gaseous contents of the intestines are known to vary, and the peristaltic action to be variously modified, by the changes of disease, it might reasonably be presumed that the sounds produced within the intestines would be subject to corresponding variations; and it is not unphilosophical to suppose that these varieties of sound may afford valuable practical indications.

It is remarkable that a celebrated English philosopher, who was not a medical man, directed attention to this subject, many years before the discovery of the art of auscultation by Laennec. Hook, in his posthumous works, says, "There may be a possibility of discovering the internal motions and actions of bodies by the sound they make. Who knows but that, as in a watch we may hear the beating of the balance and the running of the wheels, and the striking of the hammers, and the grating of the teeth, and multitudes of other noises; who knows, I say,

but that it may be possible to discover the motions of internal parts of bodies, whether animal, vegetable or mineral, by the sound they make; that one may discover the works performed in the several offices and shops of a man's body, and thereby discover what engine is out of order, what works are going on at several times, and lie still at others, and the like?" "I have this encouragement".... "from experience, that I have been able to hear very plainly the beating of a man's heart; and *it is common to hear the motion of the wind to and fro in the guts* and other small vessels; the stopping in the lungs is easily discovered by the wheezing." The prediction of this philosopher, who, as Dr. Elliotson observes, seems almost to have prophesied the stethoscope, has been fully verified in reference to the thoracic viscera and the gravid uterus; but to this time it has been strangely neglected in the investigation of the condition and action of the intestinal canal.

It is now more than twenty years since I have habitually attended to the sounds produced in the abdomen in various diseases; and in the early stage of my investigations I indulged the hope, that in disorders of the intestinal canal auscultation might gain nearly the same distinctness and precision, that it had already acquired in relation to thoracic diseases. Though I long ago relinquished a degree of this sanguine expectation, continued observation has confirmed my opinion of the importance of the subject, and has enabled me to discover practical indications which I regard as of great value.

When the ear is applied to the abdominal parietes of a healthy subject, there is heard an almost constant succession of sounds produced by the motion of the contents of the intestinal canal. These sounds are varied by many causes, such as the quickness, regularity, and other variations of the peristaltic action, the degree of fulness of the intestines, the proportions of the gaseous and other contents, the fluidity of the liquid contents, &c. The sounds, thus varying with the causes of their production, afford indication of these several causes; and they thus become signs of actions and conditions of the intestines, a knowledge of which is of the utmost importance in investigating the diseases of these viscera. In most diseases of the intestinal canal the sounds do not afford definite diagnostic signs to characterize the different diseases, like the diagnostic signs disclosed by auscultation in thoracic diseases. They are chiefly signs of particular conditions or actions, which may occur in various intestinal diseases, rather than diagnostic signs to distinguish different diseases. In some diseases, however, signs are thus obtained, which perhaps may be considered as truly diagnostic of the diseases in which they occur.

In the *Asiatic Cholera*, which prevailed in New Haven in 1832, this application of auscultation was attended with interesting results, which were noticed in an account of the cases which came under my observation, published in the *Boston Medical and Surgical Journal* for July, 1833. Writers generally noticed the loud borborygmi, audible at a distance from the patient, which occurred in that disease; and to the ear applied over the abdomen the sounds were so peculiar—at least so different from what I have observed in other diseases—that they seemed

distinctly characteristic of that disease. These sounds manifested a rapid commotion of the whole intestinal canal, and might be compared to those produced by shaking together several flasks of various sizes partly filled with water. Frequently the sounds appeared to indicate that the rapid peristaltic motions were suddenly arrested and reversed by an anti-peristaltic action, which occurrence immediately preceded a paroxysm of vomiting. The large quantity of serum effused into the intestines, causing an extreme fluidity of their contents, with the rapid and irregular peristaltic and anti-peristaltic motions, would sufficiently account for this unusual variety of sounds.*

The effects of various remedies upon the intestinal action, as indicated by the sounds, were carefully observed. Practitioners were generally disappointed, in that disease, to find the frequent vomiting and purging not checked by the administration of stimulants and astringents; and the sounds manifestly indicated that the common effect of these remedies was decidedly to increase the intestinal commotion. Such was the manifest effect of opium, unless given in doses so large as to produce alarming prostration. On the contrary, frequent small doses of camphor, with a free administration of ice, appeared to have a soothing operation in moderating the rapid and irregular intestinal action. The comparative effects of large and small doses of calomel were strikingly interesting. Frequent small doses did not seem to diminish, but at least temporarily to increase, the disordered peristaltic and anti-peristaltic motions; while a single drachm dose almost invariably caused a total suspension of these motions. Calomel, in very large doses, thus seemed to be the appropriate remedy for the disease. It appeared to overpower the diseased intestinal action, arrested the vomiting and purging, and caused a total suspension of all intestinal motion, during which no sound was audible. An interval of perfect intestinal silence and repose now continued, ordinarily from eight to twelve hours, after which a natural peristaltic murmur indicated a gradual return of healthy action, which was in time succeeded by the grass-green evacuations, commonly regarded as evidence of a favorable crisis of the disease. Thus the large doses of calomel, instead of exhausting the system by an excessive cathartic operation, actually obviated exhaustion by arresting the profuse serous evacuations attending the disease.

Ordinarily the danger was considered as overcome, when the disordered intestinal action was suspended, and the stage of repose produced; and in this town few cases terminated fatally, when the practice was adopted of effecting this result by the large doses of calomel, before the system had been extremely exhausted by evacuations. In one case, however, that of a little girl, 10 years of age, who, without any premonitory symptoms, was most violently attacked with vomiting, purging and spasms, this treatment had the ordinary effect of promptly arresting the intestinal motions; but the system did not re-act, the pulse failed and became

* It remains to be shown, whether these sounds are constant diagnostic signs of this disease, or whether, as I have observed in dysentery and other diseases, the varying epidemic type, in different seasons, will produce in cholera a variation of morbid intestinal action, with a corresponding variety of sounds.

imperceptible within an hour from the attack, the coldness and lividity of the surface increased, and, without any return of peristaltic action, the patient died five hours from the attack.

Cholera Morbus is usually attended with intestinal sounds, which indicate a succession of quick and irregular peristaltic and anti-peristaltic motions. In some cases these motions continue until the contractile power of the intestines seems nearly exhausted, when a feeble, but more regular, peristaltic murmur indicates a gradual return of healthy action. The violent symptoms are not succeeded, as in Asiatic cholera, by a long interval of total inaction of the intestines; and the sounds are very different from those heard in that disease.

There is, however, a great diversity in cases commonly termed cholera morbus. Some cases commence with a violent diarrhoea, on the cessation of which occurs an obstinate vomiting, during which, as in colic, no intestinal sounds are heard, except those produced by anti-peristaltic action. Other cases commence with vomiting, without any downward motions, until at length the action is reversed, and the disease terminates with diarrhoea.

Colic is a disease which is variously divided by writers into several species. One of these, termed *c. rachialgia*, *c. pictonum*, &c., produced by the poison of lead, has characteristics certainly sufficient to give it a specific distinction; but the other divisions, I think, have reference to various exciting causes, or attendant circumstances, rather than to any proper specific characters. In the various forms of this disease auscultation affords results, which I regard as highly interesting, and of much practical value, and which may throw some light on the pathology of the disease.

Common Colic is characterized by "gripping pain in the bowels, chiefly about the navel, with vomiting and costiveness." The exciting causes are various, as irritating indigested food, biliary derangement, habitual costiveness, hardened feces, flatus, worms, exposure to cold, and—what I consider as much the most common cause—rheumatism affecting the intestines. With these various exciting causes, the general characters of the disease are similar; the severe gripping pain, obstinate constipation and vomiting, constituting the prominent symptoms.

There is, however, an *incipient, forming, or latent stage*, which with strict observation I think may always be noticed, preceding the pain and other violent symptoms. The symptoms of this stage somewhat resemble those which precede the cold stage of intermittent fever. There is a general languor and inaptitude, often a degree of moroseness or peevishness, and commonly a slight chilliness. The sensations in the abdomen are variously described by patients, as a numb, dead, heavy, or cold feeling. Many speak of a sensation as of a cold weight, felt mostly between the region of the stomach and umbilicus. The physician is rarely consulted during this stage; and the symptoms are so slight, that ordinarily they are not particularly noticed by patients unaccustomed to attacks of the disease; while persons subject to frequent attacks learn to notice these sensations as the invariable precursors of the more violent symptoms. In this stage, which continues in different cases from half

an hour to several hours, auscultation discovers a perfect stillness within the abdominal cavity. Sometimes there is an occasional rumbling in the course of the large intestines; and, with a desire to relieve the unpleasant sensations, the patient, by a voluntary straining effort produces an evacuation of feces with a quantity of flatus. There is, however, no indication of the slightest motion in the small intestines. This forming or latent stage of colic, which is commonly overlooked both by patients and physicians, is deserving of particular attention; because during this stage the peristaltic action is easily restored, and the violent symptoms thus prevented. In many cases this may be effected simply by the application of heat to the surface, especially to the extremities. Friction to the abdomen, with a sort of kneading process, contributes also to this effect. Often a free draught of hot coffee, or of some aromatic infusion, is sufficient; in other cases, a small dose of rhubarb, or other mild cathartic, with some aromatic, is required. A few drops of cajeput oil will commonly promptly restore the peristaltic action. My usual remedy for this purpose is camphor, in frequent small doses; and I have instructed many persons to ward off habitual attacks of colic, by carrying constantly in the pocket a small piece of camphor, to be gradually dissolved in the mouth, and swallowed with the saliva, whenever these premonitory symptoms occur. This remedy is often more effectual, in exciting peristaltic action in such cases, than a brisk cathartic.

This forming stage, unless the peristaltic action is soon restored, is succeeded by the violent symptoms of the disease. With occasional short remissions, the pain becomes severe; the abdominal muscles are rigidly contracted, producing a knotted appearance of the surface, and there is occasional nausea and vomiting. The patient groans, and throws himself into various positions, with the vain hope of relieving his distress. In this, as well as in the forming stage of colic, the ear applied to the abdomen discovers no evidence of peristaltic action, but on the contrary a perfect stillness within the abdominal cavity.

This *cessation of peristaltic action*, I may confidently assert, is a chief *essential character of colic*; the motion being suspended before the occurrence of the violent symptoms, and not recurring until the disease is about to yield. Sometimes, during the violent contortions of the body, a momentary sound is heard, indicating a slight intestinal motion, which seems to be produced by the mechanical pressure of the abdominal parietes, rather than by a peristaltic action. Occasionally, too, there are sounds produced by anti-peristaltic motions, which motions either terminate at the stomach causing simply nausea, or extend into the stomach so as to excite vomiting. By these circumstances, and by the variety of sounds, anti-peristaltic motions can commonly be distinguished from a regular peristaltic action. This distinction is important, for as a cessation of peristaltic action is a main essential character of colic, so a return of this action indicates a favorable crisis of the disease. The sounds produced by anti-peristaltic motions are only occasional and transient, proceeding commonly from a limited portion of the intestinal canal; and they are usually succeeded, as before stated, by nausea or vomiting. Those attending a regular peristaltic action are produced

throughout the whole course of the intestines, constituting an almost incessant rumbling, heard distinctly at one moment directly under the ear, then gradually receding until it seems like a distant echo, and again returning in the course of the convolutions of the intestines. There is thus a union of near and distant sounds, indicating a general action throughout the intestinal canal. When this description of sounds is heard in colic, the patient may be considered as safe, even if the pain continues severe; on the contrary, a complete subsidence of the pain and other violent symptoms, unless attended by a return of healthy peristaltic murmur, affords no favorable indication, in any stage of the disease, and in an advanced stage, when the strength is exhausted by protracted suffering, it indicates extreme danger—a loss of the sensibility and excitability of the intestine, and a failing of the powers of life.

Commonly, a return of peristaltic motion is followed, almost immediately, with a relief of pain and other severe symptoms; but in protracted cases, when the bowels have become inflamed, and the soreness such that the least external pressure cannot be tolerated, this return of peristaltic motion causes a decided increase of pain. This circumstance is similar to what is often observed during the resolution of pneumonia, when a return of respiration to a portion of inflamed lung, which has previously been impermeable to air, produces the keenest pain. In such cases auscultation informs us that all is well, when the sensations of the patient would indicate an aggravation of the disease. The signs thus furnished, in colic and other diseases, will often direct the withholding of medication, when it is no longer required, and when its continuance might sometimes be injurious. Frequently they have enabled me to assure patients that the cause of difficulty was removed, and that my services were no longer required, some hours before the general symptoms showed signs of any mitigation.

Some eighteen years ago, I called one morning to see an eminent medical friend, who had been subject to frequent attacks of colic, and who was now thought to be dying, after a night of extreme suffering with this disease. Applying my ear to the abdomen, I immediately assured him that a regular peristaltic action was restored, and that the danger was over. He replied that he experienced no relief of symptoms, saw little reason for encouragement, and felt as though he could survive but a short time. The pain was now severe and increasing; and it was more than two hours from this time before the apprehensions of the patient, and of his friends generally, were at all relieved. In this case, as in many others that I have observed, it was full three hours, after my confident assurance that the disease had made a favorable crisis, before there was any evacuation from the bowels.

In March, 1847, I was called at night to a man affected with colic. After the usual precursory symptoms, he had now, for about two hours, suffered severe pain, which had suddenly increased within the last few minutes, so that he could hardly be confined to the bed. The application of the ear discovered a regular active peristaltic motion. I concluded that this was a case, such as are sometimes observed, of a spontaneous restoration of peristaltic motion, and that this returning motion

had caused the present sudden increase of pain. As the pain had not continued long enough to induce any considerable inflammation or soreness of the intestines, I did not hesitate to assure him, that if he would keep warm in bed, the pain would soon subside. I remained with him about thirty minutes, and left him in a quiet sleep—not taking to myself the credit of a cure, as I might have done, had not auscultation informed me that a spontaneous natural action had rendered medication unnecessary.

Pathologists entertain different opinions in reference to the immediate cause of colic. Some, with Cullen, consider the symptoms as owing to a spasmodic constriction of the intestines; while Abercrombie and others attribute the inaction of the intestines to torpor, or a loss of their muscular power. I am inclined to the latter opinion—to attribute the inaction of the intestines to a suspension of the motor nervous influence, and the supervening pain to a morbid excitement of the sensitive nerves. Such an association of paralysis of motion, with morbid sensibility, is not uncommon in other parts of the body. Paralysis of the limbs is often attended with paroxysms of severe pain: and in a painful sciatica, and in neuralgia of various parts of the system, the motor nervous influence is usually more or less diminished.

It is well known, however, that all the symptoms of colic are produced by any obstruction which mechanically arrests the motion through any portion of the intestines; as in strangulated hernia, involution of the intestines, and in cases of obstruction from impacted feces, calculi, or any solid substances in the intestinal canal. It is remarkable, moreover, that the same results are caused by sympathy of the intestines with obstruction in other parts; as a foreign substance in the *cul-de-sac* of the appendix vermiformis, calculi in the ureters, gall-stones in the biliary ducts, and also in severe cases of dysmenorrhœa.

In all these affections, in some stages of the complaints at least, there is the same total suspension of peristaltic motion, which occurs in colic. When the mechanical obstruction is obviated in these complaints, as in the relief of the strangulation in hernia, it is commonly observed that the relief is immediately succeeded by a rumbling sound in the intestines, which is usually followed by alvine evacuations.

It may be difficult to explain how these various mechanical obstructions should cause a suspension of the motor nervous influence in the intestines; but from my observations I may assert that there is commonly (I would not say invariably) the same numb, heavy sensation, preceding the pain and other violent symptoms, that I have described as constituting the forming stage of colic.

[To be continued.]

J. S. J.'S REMEDY FOR WORMS.

[Communicated for the Boston Medical and Surgical Journal.]

IN No. 13, Vol. XL., of the Boston Medical and Surgical Journal, there is a communication from a correspondent, J. S. J., on the subject of

intestinal worms. The writer has made a very material and important omission in not disclosing the "treatment." He says, "accident placed at his disposal the knowledge of a seed from which an emulsion was made. This, aided by adjunct remedies, all of harmless nature, given in fifteen cases of tape-worm, has not failed, once, within twenty-four hours to expel the worm." He says, "the seed is as common as that of the apple or orange"—but further saith not; consequently the whole of his communication has no more point in it, than if he had said "he had discovered a new remedy for worms," and added no more. Now may I ask of him, through you, to state in the Journal what the remedy is, and how he administers it?

W. A. GILLESPIE.

Louisa Co., Va., June 11, 1849.

HELONIAS DIÆCIA—UNICORN PLANT.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—Having, for nine years past, used this article in certain forms of disease, as a remedial agent, and found very beneficial results to accrue, I feel desirous of introducing it to the profession.*

The affections for which it is peculiarly applicable, are such as have their origin in *atony* of the generative organs of both sexes, but *particularly* those of the female.

In leucorrhœa I consider it invaluable. This, as we are all well aware, is a source of infinite annoyance to the patient. How often do we hear complaints of "pains in the head, side, back and loins, loss of strength, failure of appetite, chilliness, dejection of spirits, and occasionally difficult respiration, palpitation, fainting, swelling of the extremities," &c. &c. Our first impressions may be that we have a formidable organic malady to contend with, but upon making further investigation we find that the patient, for a longer or shorter time, has had leucorrhœa, and perhaps at the catamenial period an undue flow of that secretion. It is in such circumstances that the unicorn, judiciously administered, has produced the most happy results. I use it with a confidence I attach to *no other medicine*. Under its influence, the patient, whose life heretofore has been almost a burden, soon revives. Her uncomfortable sensations vanish, and ultimately an entire recovery of health and strength is established.

This article may be given in the form of powder, tincture, or syrup. It can be found at Mr. Wm. Brown's, 481 Washington street, Boston. The syrup is the most eligible, and Mr. Brown has prepared this in an exceedingly compact and elegant manner. Dose of the powder, 3 jss.; of the tincture, f 3 j.; of the syrup, f 3 ij.; to be taken three times a-day, half an hour before the ordinary meals. The quantity may be increased if the patient bears it well, according to the exigencies of the case, but in irritable stomachs nausea is sometimes produced, when it will be necessary to diminish, rather than to augment the dose.

I. G. BRAMAN.

Brighton, June 21st, 1849.

* Unicorn is employed by the disciples of the botanical school, as a curative agent. Vide Mattson.

CASE OF ALLEGED CONSPIRACY TO CONFINE A MAN IN A LUNATIC ASYLUM.

[A Letter to the Editors of the New York "Home Journal," dated Philadelphia, April, 1849.]

THE case of alleged conspiracy to confine a sane man in an Insane Asylum, to rob him of his property, has excited our city in an unusual manner, and given rise to many unfounded rumors, which I beg leave to correct through the medium of your widely circulated paper.

The case of Morgan Hinchman is one of the most remarkable on record, the first of the kind in this country, and I trust it may prove the last. One hundred and fifty witnesses have been examined, one month occupied in the trial, and the jury, after being out near five days, have rendered a verdict of \$10,000 damages against seven of the defendants out of the fourteen originally indicted. The representations, with which the public mind was filled, created an idea of wrong and outrage without a parallel. A man of perfectly sound mind, a shrewd, active, intelligent Quaker, was suddenly seized by six conspirators, dragged from his business and his family, his loving wife and little children, and forcibly confined in the insane asylum at Frankfort, Pa., six miles from Philadelphia, and there imprisoned for six months among raving lunatics and madmen, by whom he was assaulted and frightfully abused. That all this shocking violence was done to get possession of his property. The city has been shocked, and a cry of vengeance raised against the perpetrators of an outrage which shames the Spanish inquisition or the dungeons of the Bastile. The most frightful pictures have been conjured up, and so artfully arranged and widely disseminated, that a considerable portion of our citizens would, if on the jury, not only give the 40,000 dollars which Mr. Hinchman claims as damages, but would actually send the defendants to the State prison for life. Indeed, the recital of the plaintiff's wrongs and sufferings by his counsel and the principal witness, filled the crowded court-room with grief, and audible sobs from some, while the counsel, portions of the jury, and the venerable judge himself, shed tears. It was a scene to move the stoutest heart.

Is there not, possibly, some excuse for these defendants? I ask this with that confidence which a fair and candid examination of the evidence warrants, and I will lay the proof before your intelligent readers. I ask it in vindication of an institution which is the boast of Philadelphia and an honor to the country. I ask it in vindication of the abused and maligned character of a large, a quiet, and intelligent class of our citizens, who, since the days of William Penn, their illustrious progenitor, have been conspicuous for active benevolence and christian philanthropy. I ask it in sympathy for an aged, slandered mother, an afflicted wife, and affectionate sisters. And, above all, I ask it in vindication of the character of our city, thus stigmatized as the scene of such crimes. On the one hand, the evidence is clear and full, that the offence, if offence there has been, was done by the mother and the wife, urged thereto by his own sisters and his wife's sisters—the members of both his own family and his wife's family. That all that was done was from the most kind and conscientious motives; in the language of his mother, "had I loved my son less, I should not have done as I did. It was for his benefit, and no other

earthly consideration, induced his wife and me to have him taken to the asylum."

The asylum is pleasantly situated, without any appearance of bars, grated windows, or any other outward signs to indicate its character. It has a fine library, gardens, and extensive grounds for the use of patients, and is, altogether, admirably adapted to its design. The establishment was created by a number of benevolent Friends, at a cost of about \$75,000, and is under the care of managers, who not only receive nothing for their disinterested services, but actually aid in defraying its current expenses out of their own pockets. It is purely beneficial, with no view to profit. Such is the institution; such the managers, some of whom have, for the sake of three dollars per week, the amount received for his board, maliciously conspired to rob the plaintiff of his little property!

It will occupy too much space to go over the testimony of thirty or forty witnesses who testify to the insanity—of his dashing himself down, without apparent cause, and rolling himself over and over—of keeping a hog in his kitchen—stripping himself naked in his kitchen, to bathe in the presence of a female—getting respectable Quaker ladies into a wagon, under false pretences, and dashing through the streets at the peril of their lives, with a young horse unbroken to harness.

These may be termed small matters, but in the aggregate they are clearly evidences of a singular mind. Many of the witnesses, though unable to give the particular or precise language made use of by the defendant, owing to the lapse of time (two years), and not having charged their memories with the incoherences, so called, were nevertheless clear and unreserved in their positive belief. The physician of the asylum, who had for seventeen years officiated there, Dr. Evans, says, after describing his physical diseases, that "there was a morbid irritation of the brain, interfering with the healthy performance of its functions, and producing partial insanity; which insanity was manifested by perverted moral feelings, especially in relation to his family." The doctor gives several striking and singular proofs of his conduct while under medical treatment in the asylum—such as his delusion in regard to a loathsome disease, which he persisted for months in believing he was afflicted with, notwithstanding the doctor's positive assurance to the contrary—and "his assuring me that his wife, his mother and sister-in-law were all crazy—his anguish of mind, in believing he was confined in the asylum as a punishment for having robbed the bank. His feelings towards his wife and mother fluctuated, sometimes saying they had acted from the best motives, and admitting that his treatment was right and proper. I believe," continues the doctor, "it was to be expected that, unless measures had been taken for his immediate cure, he would be likely to become more and more deranged, and finally incurable. I think the disease could be best treated by placing him in this institution, and that it was kindness to him to place him there under treatment. It is generally desirable that a patient should be removed from his family, and no doubt exists that he was benefited by seclusion, quiet and medical treatment, which gradually restored him to health."

Dr. Kirkbride, of the Pennsylvania Hospital, testified that there are species of insanity which do not affect the reasoning faculties, and that such always require medical treatment and restraint. That the earlier such patients are subjected to treatment, the earlier will be their recovery. This was presumed to be Hinchman's case, as, in ordinary affairs, he was shrewd and intelligent—at times remarkably so.

Dr. Worthington, Dr. Evans, Dr. Kite and Dr. Griscom, "prosecuted as conspirators" in this case, are all gentlemen of the first standing, distinguished alike for benevolence, humanity and professional talent.

But, passing all the great mass of testimony, we come at once to the mother's. This is every way important. In considering this, it is proper to state that Mrs. Hinchman was left a widow and destitute when her son Morgan was seven years old; that she brought up her family of five children, and, by her own untiring exertions, educated them all in a manner that extorted the highest encomiums from the judge in his charge to the jury. She was proved by her own children, and by the united testimony of several highly respectable witnesses, to have been a "most kind, affectionate and conscientious mother." The testimony of this mother—extorted from her reluctant lips—is entitled to reasonable credence, supported, as it is, by her solemn affirmation, and by near forty other witnesses. How, with such evidence, and under such circumstances, it is possible to doubt that mother's story, we cannot conceive; when, especially, we consider that the wife of Morgan Hinchman poured her own fears and sorrows into that same mother's bosom. As the judge, in his charge, observed, that wife, who knew his every action, who felt every pulsation of his heart, she best knew the true condition of her husband, and the necessity for pursuing the course they did. The guilt, if any, centres upon these two. The crime of the other "conspirators," consisted in yielding to the prayers of the mother and wife to aid in saving one whom they tenderly loved. The mother, Mrs. Eliza W. Hinchman, under her solemn affirmation, declared as follows:—"I was always on terms of the closest intimacy and most affectionate feeling with Margaretta, my son's wife. Morgan's behavior was at times unaccountable; his very nature and disposition seemed changed. Though he had always before been amiable, kind and affectionate in his disposition, and lively and cheerful, he became morose, sullen and moody—would not speak when spoken to—so different from his natural manner, I concluded it must arise from a perversion of right feeling, an alienation of his mind and affections. He came to my house with his wife, in an highly excited state, wringing his hands and crying vehemently, and told me he had been a defaulter in the Penn Township Bank (of which Morgan was then a teller). He said he believed he would have to stand up in meeting and confess what he had done. I said to his wife:—'Surely he is crazy—he never could have done this.' He said then, in the presence of his sister Anna, his wife, and myself and my mother, it had been made known to him that if he did not stand up and confess, his first-born child would be taken from him. He said this confession was to be made in the North Friends Meeting, and I was afraid for several weeks to go to meeting lest I should see him do it. I said it could not be true; but if it

was, I told him to make instant restitution; to go to the bank and pay every cent, principal and interest, and then come away from that bank, if thee has nothing but thy coat left to thy back. I said if he paid every cent back he would be forgiven by his fellow-man and by his Almighty Judge." He did pay it back. (This is partly confirmed by Mr. Russell, the cashier of the bank, who testified to the missing of the money some time back, of Morgan's confessing he took it, and that he then paid it back, six hundred dollars, principal and interest; and though he asked to be permitted to remain at his desk the day out, he was compelled to leave at once.)

The mother details at length her visit to the son's farm, where she went to recruit her health, her confinement in the city having produced great debility, weakness of the breast, and spitting of blood. On the road, with two stout young horses, he complained so much of the load being heavy, that she asked him "how much?" He replied, "about one hundred pounds." She got out and walked. After a while she got in again, and on his continuing to complain of the load, she again got out and walked. "The next morning his wife asked me to go with her into the orchard to get some nice sweet apples. They commenced picking from that particular tree, because they would bake so nicely without sugar. Her son came up, appeared highly excited and exasperated, wrenched the little basket violently from his wife's hand, and told us to go to another tree. We had done nothing to exasperate him. His wife remonstrated, but made no resistance, saying to him she wanted those apples because they cooked so nicely without sugar. I told her to hold her apron and I would knock some down for her, for she had as good right to the apples as he had, as her money helped to buy the farm. He then seized me violently by the arm, and commenced dragging me; finding he could not get me along in that way, he gave me a kind of twist over the shoulder, and in that way was dragging me, when my cries brought assistance. I sat on the ground weeping for some time. My colored woman helped me into the house, and into bed, where I was bathed with something which Margaretta prepared. A wagon was obtained the next day, and as I was going away, Morgan came out, more like himself, and said: "Why, mother, thee is not going?" (Great stress is laid upon her not shaking hands with him, at parting; but we should suppose that, after such treatment, some manifestation of disapprobation and displeasure was natural, if not quite proper. Much, also, is laid on the remark made by the mother, as to the wife's right to the apples. This may have been injudicious, but it must be admitted that much depends upon the tone and temper in which this "gentle rebuke" of the mother was uttered, while some allowance is certainly due for the unnatural and ungenerous provocation. The bruises received by the aged mother required medical treatment for a week. This occurrence was in 1845. It was made the subject of inquiry at the meeting of which he was a member, but not at her instance. The mother testifies that on this, as on the Bank, and other occasions, she told no one. She tried to conceal her son's infirmities, and has never said anything about them until forced to do so.)

"His wife had always been a most kind, affectionate and devoted wife. She came to my house, saying her husband had refused to bring her, that he was in a highly excited state. We believed his situation was such as to require the immediate steps we took. (The conversation of the wife was ruled out, though this would have showed the state of insanity, and was, in fact, the actual foundation of the decision then come to. She was apprehensive of her own safety, and that of her children.)

After their course had been fully concluded on, the Richies, brothers-in-law, were applied to. "They positively refused to have anything to do with it, unless it was the wife's wish. These brothers had been Morgan's securities at bank, up to the time of his leaving, and were actuated, the mother says, by the kindest motives. It is important to show who were the first and prime movers in this alleged conspiracy. They were the mother and wife. Next come the two Richies, who, in being appealed to, said, in the language of the mother, "that, unless our minds were made up, as to the necessity and propriety of the step, they would have no hand in it. We told them it was; I mean his wife, his wife's sister, his own sister, and myself." Here, then, are the conspirators.

The plaintiff Hinchman himself, after having been in the Asylum some months, furnishes the best evidence of his having been safely placed where he was. He had the whole range of the grounds attached to the Asylum, some sixty acres, yet never went off; or if he did go off, was always sure to come back. He visited a distant friend (Shoemakers), staid all night, and when in that friend's carriage, next morning, insisted on getting out and walking, when near the Asylum, with the avowed reason "that his return might be, as it really was, entirely voluntary!" Another witness, Philip S. Justice, testifies that he was riding in the neighborhood of the Asylum, and met a man on the road, of whom he asked the way. He noticed he had a wild, deranged appearance. The man said, "do you not know me?" The witness did not, had never seen him before. "Why," said he, "I am Morgan Hinchman; my friends have put me in that Asylum, but I don't think I am insane." He said they had "killed his child; and his wife promised to come when the grass grew, but she had not." He said he had made his escape, but then added, "I am out on parole, but I don't think I'll go back, but I'll get a lawyer." After ten minutes conversation the witness drove on, and then looking back, saw Morgan climbing over the fence, anxiously struggling to get back into the Asylum.

If this is not a full admission of his having been of a singular mind, and of the good motives of his friends in placing him where he was receiving such kind treatment as his disorder required, then is the English language incapable of expressing a solemn, self-evident truth. The idea of his being restrained by "parole," is simply ridiculous, unless he was fully conscious of its justice and propriety. "Paroles," with kidnappers and malicious conspirators or robbers, are never kept, never binding; and if he was not conscious of this, it is only another proof his folly; yet all the evidence shows he was not a fool. This decision in his own case, *made by himself*, when out and at liberty, is a very significant deci-

sion, upon which the defendants were entitled to some mercy, and without a particle of other testimony.

Besides the large number of witnesses who positively testify to the insanity, from supposed knowledge, those fourteen persons whose mouths have been closed, as defendants, in the case, could have given some evidence of his most suspicious conduct, and so of his own mother, and his own wife, his sisters and brothers. They have testified to the same truth, and, moreover, under the most solemn influences, that mother has told her story; her long-indulged fears, and their causes; and in the most clear and impressive manner, has shown that whatever was done against Morgan Hinchman, her son, was done under the most conscientious conviction of duty; done for his own good, from the best of all possible motives, and done in a spirit of affection and love.

The character of this mother is unimpeached—it is unimpeachable. The plaintiff's own counsel, in the most decisive manner, declared they would not, and did not, impeach it. She has been proved, in that court, to possess a character without reproach, and on her testimony alone there cannot, there does not, exist a single earthly stain. Had she a motive for so shocking an outrage against her son, as is alleged to have been committed? Is she capable of periling her own soul with the guilt of perjury? Her testimony may outweigh that of a thousand witnesses who testify to what they never saw, of what they never heard, of acts and conduct which, never having witnessed, they can have no knowledge of.

The verdict, at length brought in, I have little hope will be set aside, though, on separately examining the members of the jury, there was evidence that all the jury had not a fair conception of who they had found for or against. Much of the deep-rooted prejudice to which I refer as existing here, may be traced to the early, one-sided publications, and the great length of the testimony, which prevented many from giving it the candid examination it merited. It is a common remark here that "we did not read all—there was so much of it we got tired." Now, as all the plaintiff's stories and evidence was brought in first, that had the first chance and took the deepest hold. So deep, indeed, that, with some minds, a Niagara cataract of truth could make no after impression.

I have been cautioned against making any publication on this subject. I trust a fair expression of opinion upon this remarkable case, and some of the reasons upon which that opinion is based, will not subject the writer to prosecution at the hands of those who may desire either to muzzle or intimidate the press. However much the low and grovelling character of a certain class of papers has had a tendency to degrade, in public estimation, the newspaper press, and render its boasted liberty a reproach, the time cannot yet have arrived when any fair and honest expression of sentiment, or statement literally confined to evidence given publicly, openly, in a court of justice, upon any subject, is a crime or an offence.

If the public press is to be muzzled, or only let loose on one side—if respectable, exemplary females are to be held up as monsters—if a

large, quiet, inoffensive class of citizens can be blackened as wicked and malicious conspirators, and their mild, benevolent institutions denounced as barbarous inquisitions and inhuman dens—if our most excellent physicians can be stigmatized as base conspirators, and the reputation of our city be seriously assailed, and our best citizens made objects of suspicion, distrust and dread to the stranger and to the country—if, I say, all this can be done, and no word of forbearance be allowed to escape through a single press of the city, then have we as perfect a censorship of the press as any kingly despot or foe to human liberty could desire. But I have no such apprehensions. I give this defence of the persecuted to the public with entire confidence that my motives will be truly appreciated; and I give my address to the editors with the request that it shall be promptly given up to whoever may apply for it. I shrink from no responsibility, and will willingly meet the question as to whether we have or have not so much "freedom of speech" and "liberty of the press" as may warrant one honest word of consolation to the afflicted.

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON. JUNE 27, 1849.

Hinchman's Case.—The fact that a man of the name of Hinchman had recently recovered heavy damages against various of his family and friends, for a conspiracy in placing and keeping him in the "Friends' Retreat for Persons deprived of their Reason," near Philadelphia, has been sent from one end of the country to another in the public journals. This, as an item of news, was natural and certainly unobjectionable, although the one-sided view and ungentle commentaries, frequently indulged in by those who draw their conclusions solely from *ex parte* statements, or from the feeling that the verdict of a jury is infallible, would have been spared, had the writers themselves read the testimony given at the trial. The Trustees and Physicians of the Institution were honorably discharged, no shadow of wrong doing appearing against them. The sole object of including them in the suit, doubtless, was to prevent them, the only actual witnesses of the man's true condition, from testifying on the trial.

The case is not decided, being hung up for a new trial, which it is devoutly to be wished may have its venue changed to some part of the State removed from the control of that somewhat notorious entity, a "Philadelphia jury."

It is probable that after alternate decisions, the one way and the other, a final result will be reached, more or less in accordance with right and justice, as the copper may fall heads or tails up. In Vermont, a few years ago, it was customary, in all trials, to have a process known as "trying the rubber"—each party having a right to a review. The third contest settled the question, if the lives and estates of the parties held out to the end of this alchemy of "the perfection of reason." There were piles of *oyster shells* for the litigants, whatever became of the *oysters*.

The summary of proof, in our present number, drawn from the testi-

mony as published in a New York paper, may be read with profit by that class of elevated and honorable minds, who are not ready, on the instant, to believe evil against their neighbor, and by whom the noble maxim of *audi alteram partem* is not practically unrecognized.

Institutions of such kind as the Friends' Retreat demand in a particular manner that generous support of the medical profession which they have so long and so well received, and especially against vulgar scandal and petty detraction. There is a morbid curiosity respecting the insane and their acts, giving rise to the strange propensity we find in hundreds to visit *public* institutions, as they would menageries, or even to still more exceptionable interferences in the unthinking and illiterate. Not satisfied with that minute, never omitted responsible inspection exercised by Boards of Directors and Trustees, selected in whole or in part by the Executive from the highest moral worth, the deepest philanthropy, and the keenest practical sagacity, whose personal and public character is directly involved in the management, and to whom the admission, keeping and discharge of each inmate is entrusted, we find volunteer patrons and protectors, not exactly of the character that an intelligent public would select for such, or indeed any other office. We find, also, a readiness in the mob-spirit, under the lead of such counsellors, to be inflamed by the most absurd rumors and ridiculous aspersions, which is truly wonderful. At Frankford Asylum, built by \$75,000 of peaceable Quakers' money—the disinterested advantages shared to all the necessitous and afflicted—the militia were even called out at the instance of the insurance companies, to protect this noble charity against the tender mercies of a "Philadelphia mob," collected from the high-souled and oppression-hating alehouses and grogeries of the purlieus of that great city of mobs. Had no property rights, except those of the peaceful Friends, been involved, the scenes of Mount Benedict would have been still more awfully rehearsed!

A servant, discharged for petty larceny or abuse; an unrecovered patient, who objects to his temporary protection against killing his friends or firing his or their buildings; an inquisitive neighbor, who had refused to give a single night's sitting up to relieve the exhausted friends of the sick man, and had been refused an interview which he had no right to ask; or some creature in human form (for even so strong cases as this may have happened), infuriated because the officers of an institution recoiled from co-operating to make an unexceptionable wife a permanent, instead of a temporary, inmate of their walls, can easily raise a breeze of calumny in the orbits where they happen to move.

The medical profession in many parts of the country may be well excused for having little confidence in the decisions of courts and juries, as regards all matters touching their calling. The profound ignorance of lawyers upon all matters of science, is reflected to a jury, upon whom a decision of some nice point of professional practice is devolved, when no individual member of court, bar or jury, would trust his judicial compeer to administer a drench to his horse, if sick. Their individual ignorance when combined is the perfection of wisdom. The decisions of such bodies, especially in cases for malpractice, as presented time after time in our pages, are "passing strange." The weight of evidence is arrived at and handed over to the jury, by deducting the *numbers* of medical men who have sworn on one side, from the sum total of those on the other—even if such a balance should throw Abernethy and Cooper, Jackson and Warren, on one side, and Dr. This and Dr. That, unheard of beyond their own sawmill or grocery, on the other!

Fortunately in a highly cultivated community, such as it is our happiness to live in, all questions of a medical character, or involving professional reputation, may be safely trusted to our courts and juries. They have enough wisdom and not too much pride of opinion to ask for, and rely upon the skilful, experienced and morally elevated, whose characters and testimony are the dread of the ignorant and empirical, as they are the safeguard and stay of the well informed and conscientious.

The Judge in the above case, it appears by the report, had to deliberate over night whether the testimony of experts was admissible. He came, of course, to that only conclusion which most courts would have needed no time to pronounce.

Cholera.—Many of our readers express a hope that every item of cholera intelligence will be given in the Journal from week to week, and they further seem to concur in a desire for the publication of the true system of treatment. The daily press of the whole country anticipates us in chronicling the points where it is developed, the destruction that marks its progress; and with respect to remedies, there are scarcely two physicians who practise alike in the disease, either here or in Europe. It is therefore impossible to comply with the various suggestions and requests of gentlemen abroad, however gratifying it might be to do so. Our pages are open for discussion, for the registering of and for the diffusion of any kind of medical instruction that may be serviceable to the profession or the people at large.

A fearful mortality certainly follows the appearance of the cholera in many parts of this country; and still the word is, among some physicians, there is nothing to fear, it being harmless in its character and perfectly manageable. It is time for physicians to hold their peace, rather than attempt promulgating such an idea, since death and the voice of the whole world belie the assertion. We shall endeavor to find room in our pages for all that may be considered of value relating to the disease, and correspondents are requested to continue their aid by furnishing whatever is of that character. It does not spread in this city.

Sick-room Bedstead.—Dr. Josiah Buckman, an estimable physician, of Woodstock, Vt., is exhibiting to the profession of Boston a very ingeniously-constructed bedstead, which far surpasses all that have been previously devised. By the turn of a winch, the patient may be placed in any desirable position, bathed, showered, or put into a vapor bath, without leaving the bed. Every rich man should have one in his house; and with respect to hospitals and charitable institutions for the sick and infirm, would it not be the summit of benevolence to provide each and all of them with this excellent and admirable structure? If some cabinetmaker would commence the manufacture at once, he might reap a harvest of patronage.

Tracts for Cities.—A series of cheap pamphlets are in the course of publication, by Edward H. Fletcher, 141 Nassau street, New York, that deserve a much higher order of notice than they will probably receive by the press generally. Philanthropy of a certain kind is scarcely marketable of late, and those, therefore, who propose to benefit their fellow creatures with tracts upon various subjects in regard to morals, health and happiness, are not half so welcome as they would be with a gift of Christmas goose,

a fat turkey, or a dozen of London porter. Still, the man who writes for the million, with a view to teaching them the principles of social comfort, even if entirely unconnected with the most elevated of all pursuits, the study of our personal duties and responsibilities to God, and ultimately succeeds in effecting the object, is a far greater benefactor than the one who gives a loaf of bread, not because he delights in acts of charity, but to rid himself of the importunities of a beggar. Who the author or authors of these cheap pamphlets are, we know not; but we cannot withhold from them our honor and respect. Sound philosophy is a leading element in all those examined by us—and better still, they are written so as to be understood. One of the reasons why there are so many abortive efforts to teach the ignorant through books, is to be imputed to the circumstance of their being written wholly above the comprehension of those for whom they are designed. If such people are to be raised, those who propose to do it must stoop down, instead of vainly waiting to have them come up by simple solicitation.

That part of the Tracts most interesting to us, regards *The Popular Violations of the Laws of Health*. Many persons of supposed intelligence are astonished at being informed that health is actually regulated by certain ordinances, established in nature. The idea of a kind of haphazard condition of the vital functions may sometimes flit through the mind; but that there is an orderly succession of actions going on in the interior of the body, and that life, health and disease, are influenced by them, rarely becomes the subject of thought, much less intense or profound reflection. A leading object in these Tracts is to impress very common minds with certain well-established truths, which have been discovered by physiologists; and if the writers succeed in doing so, it is quite certain that the learners will not disobey injunctions from such unerring authority as nature herself. We shall be gratified to know that the people up the dark lanes, in the cellars, in the workshops, the factories, on shipboard, and among the canals, study these excellent illustrations of the causes of ill health, epidemics, &c., as well as the method of securing sound health and longevity. Physicians might give additional weight to these messengers of domestic happiness, by recommending them and explaining their utility to those for whom they were specially designed.

Berkshire Medical College.—Accompanying the annual announcement of the next course of lectures in that well-established institution, which will commence on Thursday, the 2d of August next, is a catalogue of the graduates at the close of the last season, as follows:—Julius P. Anthony, Henry S. Babbitt, John J. Bagley, William C. Bailey, Clarence M. Brownell, John Buchanan, Warren Byrns, Lockhart B. Farrar, Charles A. Greene, Ezra L. Griffin, George M. Hall, James B. Hawkes, Edwin Haynes, Charles L. Hubbell, Samuel W. Jones, Charles A. King, Leman R. Leach, John R. Leal, Henry Miller, David C. Powers, William Russell, Tristram Sanborn, Herschell D. Spencer, E. Lewis Warren, John H. Welch, J. Bellamy Whiting. Dr. Levi Folsom, Mass.; Dr. Joseph Gray, Penn., honorary graduates.

Physician and Patient.—Mention was made last week of the preparation of a new work, by Worthington Hooker, M.D., of Norwich, Conn.

We have since learned that it will be speedily brought out by a New York publishing house. Those who have had access to the manuscript, speak enthusiastically of its merits. At present only the title and synopsis of the contents can be given, which, however, is enough to show that something is coming of no ordinary character. The title is, "Physician and Patient—or a Practical View of the Duties, Relations and Interests of the Medical Profession and the Community." The titles of the chapters are—uncertainty of medicine; skill in medicine; popular errors; quackery; Thomsonism; homœopathy; natural bone setters; good and bad practice; theory and observation; popular estimates of physicians; means of removing quackery; intercourse of physicians; interference with physicians; mutual influence of mind and body in disease; insanity; influence of hope in the treatment of disease; truth in our intercourse with the sick; moral influence of physicians; pleasures and trials of a medical life.

Medical Miscellany.—A physician in California received \$150 for four visits.—Madbury, N. H., is said to be without a medical practitioner. Is there a parallel to this in the United States?—Rhubarb stalks, used extensively for pies, at this season, are thought to be productive of diarrhœa and other difficulties of the bowels.—According to Dr. Goodall, the negro is more subject to the cholera than the white man, and the white man more than the white woman.—Those who are unwilling to believe that age destroys the powers of vision, are paying large fees for being duped with the notion that their old optics can be made as good as new by certain adroit manipulations, at five dollars for five minutes. It is a gross imposition.—In the city of Lawrence, Mass., which commenced its existence only three years ago, there are 18 physicians. It is destined soon to become a place of immense manufacturing importance.—It is very sickly among the California emigrants.—Dr. G. W. Sanford has been appointed Post Master at Tariffville, Conn.—Dr. David Tucker has accepted the appointment of Professor of the Practice of Medicine at the Richmond Medical College, Virginia.—Dr. A. G. Henry, of Springfield, Illinois, considers the late epidemic disease at Sutton and Millbury, Mass., to have been a malignant typhus fever, such as prevailed at Pekin, on the Illinois river, two years since.—Mrs. Abigail Morton died recently at Bristol, Me., aged one hundred years, eleven months and twelve days.

TO CORRESPONDENTS.—Dr. Page's Remarks on Epidemic Cholera; Dr. Tracy's account of Medicine in Siam, and his case of Irregular Scarlatina; and Professor Meeker's case of Diseased Kidney, have been received.

MARRIED.—Alexander Jackson, M.D., of Plymouth, Mass., to Miss C. A. Reeves.—At Nashua, N. H., Dr. Isaac Ayling to Miss E. Chandler.

DIED.—At Wolcottville, Conn., Peter Beardslee, M.D., 24.

Report of Deaths in Boston—for the week ending June 22d, 76.—Males, 40—females, 36.—Of consumption, 14—scarlet fever, 5—lung fever, 4—infantile, 8—dropsy on the brain, 6—dropsy, 1—measles, 4—disease of the heart, 2—drowned, 3—tumor, 1—diarrhœa, 2—paralysis, 2—brain fever, 2—teething, 2—croup, 1—inflammation of the lungs, 1—disease of the brain, 1—typhus fever, 2—accidental, 3—child-bed, 2—cholera morbus, 3—old age, 1—convulsions, 2—dysentery, 2—peritonitis, 1—rheumatic fever, 1.

Under 5 years, 32—between 5 and 20 years, 11—between 20 and 40 years, 16—between 40 and 60 years, 10—over 60 years, 7.

Testimonial to Dr. Forbes.—A meeting of the subscribers to this testimonial took place lately, for the purpose of presenting to the above-named gentleman a very handsome piece of plate, designed and executed by Messrs. Smith, of Duke street. Upwards of one hundred gentlemen attended on the occasion. Mr. Stanley, President of the Royal College of Surgeons, read an address, which had been prepared by the committee. The address stated that the testimonial was intended to mark the approbation of many of his professional brethren for the manner in which Dr. Forbes had conducted the British and Foreign Medical Review, and, also, as a token of esteem for his manly, disinterested, and truthful character. To carry out these views, it was mentioned, that many of the most eminent members of the profession, not only in Great Britain, but in America and the Colonies, had come forward on the occasion. After presenting the address, Mr. Stanley proceeded to say, that he most cordially concurred in its contents, and that he was gratified at having been chosen as the organ of the committee. Dr. Forbes replied in a complimentary speech, in which he stated, that while the committee had done him no more than justice in attributing to him the best intentions in conducting the British and Foreign Medical Review, yet he could not accept for himself the eulogistic terms in which the character and influence of that journal had been alluded to. It was chiefly to his excellent contributors, that the literary merit of the work must be ascribed. His duties had been restricted, as a general rule, to supervision and correction; it was only occasionally he had appeared as an original contributor. Yet he took credit to himself for having taken the utmost pains to ensure not only able reviews, but honest ones—reviews unbiassed by personal feelings of any kind, and dictated by no friendly or unfriendly feeling. The editorship of the British and Foreign Medical Review had been to him no ungracious and oppressive task; on the contrary, it had been a source of the highest pleasure, a true labor of love. But had it been otherwise, he would have been recompensed by the great honor which had now been paid to him—an honor, the remembrance of which he should cherish to the latest period of his life.—*London Lancet.*

Albumen in the Urine of Cholera Patients.—It appears from investigations made at the military hospital of Val de Grace, and at the Hotel Dieu, in Dr. Rostan's wards, that albumen exists in the urine of cholera patients, as proved by the nitric acid and heat tests. Whenever the urine was tried, albumen was found in it, and this took place with as many as thirty patients. This substance is, however, not to be discovered in every stage of the disease; it is mostly to be found at the beginning of the attack, and three or four days after. It has generally seemed that the presence of albumen was in keeping with the severity of the attack; when the albumen diminishes before the time when it is commonly absent, some improvement may be foretold. Dr. Rostan is inclined to attach much importance to this new symptom, and in doubtful cases would give no prognosis without testing the urine.—*Ibid.*

Anile Dentition.—The Journal des Connaissances Médico-Chirurgicales informs us of the evolution of three incisors and two molars in a woman 92 years of age. The gums were getting red upon several other points. This old woman unfortunately died soon after (probably from teething!). The new teeth were said to be very white, but not firm.